United States District Court For the District of Delaware



Acknowledgement of Service Form Scanned
For Service By Return Receipt

Civil Action No. 08CV4 CMC

Attached below is a return receipt card reflecting proof of service upon the named party on the date show.

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul> <li>Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.</li> <li>Print your name and address on the reverse so that we can return the card to you.</li> <li>Attach this card to the back of the mailpiece, or on the front if space permits.</li> </ul>	A. Signature  X  Agent  Addressee  B. Received by (Printed Name)  D- HOOFFNAOLE  7  13  D. Is delivery address different from item 1?
Article Addressed to: James Walsh 6/0 DCC 1181 Paddock Rd.	If YES, enter delivery address below:
Smyrna DE 19977 08-4 GMS	3. Service Type  Certified Mail Registered Return Receipt for Merchandise Insured Mail  4. Restricted Delivery? (Extra Fee)  Yes
2. Article Number  (Transfer from service label)  7007 2480 0003 30045400	
PS Form 3811, February 2004 Domestic Ret	urn Receipt 102595-02-M-1540